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BI (Official Form 1)(04/	United States Bankruptcy Court Northern District of Illinois					Volu	ıntary	Petition				
Name of Debtor (if indiv Nerad, Sarah	vidual, ente	er Last, First,	Middle):			Name	of Joint De	ebtor (Spouse	) (Last, First	, Middle):		
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):  FKA Sarah Randolph				All Of (include)	ther Names de married,	used by the J maiden, and	oint Debtor trade names	in the last 8	years			
Last four digits of Soc. S (if more than one, state all)	ec. or Indi	vidual-Taxpa	yer I.D. (	ITIN)/Com	plete EIN	Last for	our digits o	f Soc. Sec. or	Individual-	Γaxpayer I.D	D. (ITIN) No	o./Complete EIN
Street Address of Debtor 1378 Empire Ct. # Freeport, IL	*	Street, City, a	nd State)	:	ZIP Code		Address of	Joint Debtor	(No. and Str	reet, City, an	d State):	ZIP Code
					61032							ZIF Code
County of Residence or of <b>Stephenson</b>		•					•	ence or of the	1			
Mailing Address of Debte	or (if diffe	rent from stre	et addres	s):		Mailir	ng Address	of Joint Debt	or (if differe	nt from stree	et address):	
				Г	ZIP Code	;						ZIP Code
Location of Principal Ass (if different from street ac						<b>I</b>						
Type of 1					of Business	3			of Bankrup Petition is Fi			:h
(Form of Organization) (Check one box)  Individual (includes Joint Debtors)  See Exhibit D on page 2 of this form.  □ Corporation (includes LLC and LLP) □ Partnership □ Other (If debtor is not one of the above entities, check this box and state type of entity below.)  (Check one box) □ Health Care Business □ Single Asset Real Estate as de in 11 U.S.C. § 101 (51B) □ Railroad □ Stockbroker □ Commodity Broker □ Clearing Bank			s defined	Chapt Chapt Chapt Chapt Chapt	er 7 er 9 er 11 er 12	☐ Cl of ☐ Cl of	napter 15 Pe a Foreign M napter 15 Pe a Foreign N	tition for Re Iain Procee tition for Re	eding ecognition			
Chapter 15 Debtors  Country of debtor's center of main interests:  Each country in which a foreign proceeding by, regarding, or against debtor is pending:  Tax-Exempt Entity (Check box, if applicable) Debtor is a tax-exempt organizati under Title 26 of the United State Code (the Internal Revenue Code			e) zation tates	defined "incurr	are primarily co 1 in 11 U.S.C. § ed by an indivi- onal, family, or	(Check onsumer debts, 101(8) as dual primarily	for		are primarily ess debts.			
I	ng Fee (Cl	neck one box	)			one box:		-	ter 11 Debte			
Full Filing Fee attached  Filing Fee to be paid in attach signed application debtor is unable to pay form 3A.  Filing Fee waiver reques attach signed application	n for the cou fee except in sted (applica	rt's considerati installments. I	on certifyi Rule 1006( 7 individua	ng that the b). See Officals only). Mu	Check Check Check BB.	Debtor is not if: Debtor's agg are less than all applicable A plan is bein Acceptances	a small busing regate nonco \$2,490,925 (each boxes: no filed with of the plan w		defined in 11 United debts (exc to adjustment	J.S.C. § 101(5) Eluding debts on 4/01/16 ar	(1D).  Dowed to inside the inside the every three thre	lers or affiliates) e years thereafter). editors,
Statistical/Administrativ  ☐ Debtor estimates that ☐ Debtor estimates that, there will be no funds	funds will , after any	be available exempt prop	erty is ex	cluded and	administrat		es paid,		THIS	SPACE IS FO	OR COURT I	JSE ONLY
Estimated Number of Cre	editors  100- 199	200-	1,000- 5,000	5,001- 10,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	OVER 100,000				
Estimated Assets  \$\begin{array}{ccccc}	\$100,001 to \$500,000	\$500,001 to \$1	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion				
Estimated Liabilities  S0 to \$50,001 to \$50,000	\$100,001 to \$500,000	\$500,001 to \$1	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion					

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**B1** (Official Form 1)(04/13) Page 2 Name of Debtor(s): Voluntary Petition Nerad, Sarah (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Date Filed: Location Where Filed: - None -Date Filed: Location Case Number: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition.  $\mathbf{X}$  /s/ Edward J. Mitchell November 25, 2014 Signature of Attorney for Debtor(s) (Date) Edward J. Mitchell Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

Page 3 of 47 Document **B1** (Official Form 1)(04/13)

## **Voluntary Petition**

(This page must be completed and filed in every case)

## Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

#### X /s/ Sarah Nerad

Signature of Debtor Sarah Nerad

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

November 25, 2014

Date

#### Signature of Attorney\*

#### X /s/ Edward J. Mitchell

Signature of Attorney for Debtor(s)

#### Edward J. Mitchell

Printed Name of Attorney for Debtor(s)

#### Edward J. Mitchell, Attorney at Law

Firm Name

110 N. Broad St. Lanark, IL 61046

Address

#### 815-493-6339

Telephone Number

#### November 25, 2014

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

#### **Signature of Debtor (Corporation/Partnership)**

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Name of Debtor(s):

Nerad, Sarah

#### **Signatures**

#### Signature of a Foreign Representative

Page 3

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

7	v
2	١

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

#### Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

	_			
٩	٧	v	•	
	١,	8		

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

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B 1D (Official Form 1, Exhibit D) (12/09)

### United States Bankruptcy Court Northern District of Illinois

In re	Sarah Nerad		Case No.	
		Debtor(s)	Chapter	7

## EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

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B 1D (Official Form 1, Exhibit D) (12/09) - Cont.	ge 2
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.); ☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, of through the Internet.); ☐ Active military duty in a military combat zone.	or
□ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.	
I certify under penalty of perjury that the information provided above is true and correct.	
Signature of Debtor: /s/ Sarah Nerad Sarah Nerad	
Date: November 25, 2014	

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B 6 Summary (Official Form 6 - Summary) (12/13)

# **United States Bankruptcy Court Northern District of Illinois**

In re	Sarah Nerad		Case No		
_		Debtor			
			Chapter	7	
			*		

## **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		
B - Personal Property	Yes	3	8,811.51		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		0.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	8		24,127.73	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			2,991.13
J - Current Expenditures of Individual Debtor(s)	Yes	2			3,061.00
Total Number of Sheets of ALL Schedules		21			
	T	otal Assets	8,811.51		
			Total Liabilities	24,127.73	

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B 6 Summary (Official Form 6 - Summary) (12/13)

# **United States Bankruptcy Court Northern District of Illinois**

In re	Sarah Nerad		Case No.		_
-		Debtor	,		
			Chapter	7	

## STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C.  $\S$  159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	7,179.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	7,179.00

#### State the following:

Average Income (from Schedule I, Line 12)	2,991.13
Average Expenses (from Schedule J, Line 22)	3,061.00
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	4,058.82

#### State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY"     column		0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		24,127.73
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		24,127.73

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B6A (Official Form 6A) (12/07)

T.,	Carab Navad	Con No
In re	Sarah Nerad	Case No.
_		Debtor

#### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property

Nature of Debtor's Interest in Property

Nature of Debtor's Interest in Property

Nature of Debtor's Interest in Property, without Community

Nature of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption

Amount of Secured Claim

None

Sub-Total > **0.00** (Total of this page)

Total > **0.00** 

(Report also on Summary of Schedules)

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B6B (Official Form 6B) (12/07)

In re	Sarah Nerad	Case No.
_		Debtor

#### SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	\$45.00 cash in debtor's possession	-	40.00
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan,	Checking account in Woodforest National Bank in Freeport, IL	-	62.84
	thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	Savings account in Woodforest National Bank, Freeport, IL	-	4.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	Security deposit with Winter & Associates on debtor's place of residence	-	550.00
4.	Household goods and furnishings, including audio, video, and computer equipment.	Miscellaneous household goods & furnishings	-	500.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X		
6.	Wearing apparel.	Miscellaneous wearing apparel	-	300.00
7.	Furs and jewelry.	X		
8.	Firearms and sports, photographic, and other hobby equipment.	X		
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X		
10.	Annuities. Itemize and name each issuer.	x		

Sub-Total > 1,456.84 (Total of this page)

**<sup>2</sup>** continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re	Sarah Nerad			Case No.
-		Debtor	,	

## SCHEDULE B - PERSONAL PROPERTY

	Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X		
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	401-K and Roth 401(k) with Telephone and Data Systems, Inc. (TDS)	-	4,304.67
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X		
14.	Interests in partnerships or joint ventures. Itemize.	x		
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	United States Savings Bond	-	50.00
16.	Accounts receivable.	x		
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	Receives very sporadic payments of child support No payments since January, 2014.	rt	0.00
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X		
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	x		
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X		
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	x		
			Sub-Tot	al > 4,354.67

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re	Sarah Nerad	Case No
_		<del>,</del>

Debtor

## **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.	20	001 Nissan Pathfinder	-	3,000.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.	X			

Sub-Total > (Total of this page)

3,000.00

Total > **8,811.51** 

Sheet **2** of **2** continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

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B6C (Official Form 6C) (4/13)

In re	Sarah Nerad	Case No.
-		,

Debtor

## SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled (Check one box)  ☐ 11 U.S.C. §522(b)(2)  ☐ 11 U.S.C. §522(b)(3)	\$155,675.	Check if debtor claims a homestead exer \$155,675. (Amount subject to adjustment on 4/1/2 with respect to cases commenced on of					
Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption				
Cash on Hand \$45.00 cash in debtor's possession	735 ILCS 5/12-1001(b)	40.00	40.00				
Checking, Savings, or Other Financial Accounts, C Checking account in Woodforest National Bank in Freeport, IL	Certificates of Deposit 735 ILCS 5/12-1001(b)	62.84	62.84				
Savings account in Woodforest National Bank, Freeport, IL	735 ILCS 5/12-1001(b)	4.00	4.00				
Security Deposits with Utilities, Landlords, and Oti Security deposit with Winter & Associates on debtor's place of residence	<u>hers</u> 735 ILCS 5/12-1001(b)	550.00	550.00				
<u>Household Goods and Furnishings</u> Miscellaneous household goods & furnishings	735 ILCS 5/12-1001(b)	500.00	500.00				
<u>Wearing Apparel</u> Miscellaneous wearing apparel	735 ILCS 5/12-1001(a)	300.00	300.00				
Interests in IRA, ERISA, Keogh, or Other Pension of 401-K and Roth 401(k) with Telephone and Data Systems, Inc. (TDS)	or Profit Sharing Plans 735 ILCS 5/12-1006	4,304.67	4,304.67				

735 ILCS 5/12-1001(c)

Total:	8,211.51	8,811.51

50.00

0.00

2,400.00

Government & Corporate Bonds, Other Negotiable & Non-negotiable Inst. United States Savings Bond 735 ILCS 5/12-1001(b)

Alimony, Maintenance, Support, and Property Settlements
Receives very sporadic payments of child 735 ILCS 5/12-1001(b) support. No payments since January, 2014.

<u>Automobiles, Trucks, Trailers, and Other Vehicles</u> 2001 Nissan Pathfinder

50.00

0.00

3,000.00

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B6D (Official Form 6D) (12/07)

In re	Sarah Nerad	Case No.
-		Debtor

#### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D

CDEDITODIS NAME		Hu	sband, Wife, Joint, or Community		U	D	AMOUNT OF	
CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	ロヨーマローロロ	DISPUTED	CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.				Т	T E			
			Value \$		D			
Account No.								
			Value \$	Ш				
Account No.			Value \$					
Account No.								
			Value \$					
continuation sheets attached			S (Total of th	ubto nis p				
				T	ota	1	0.00	0.00
			(Report on Summary of Sci				0.00	0.00

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B6E (Official Form 6E) (4/13)

In re	Sarah Nerad	Case No
-		, Debtor

#### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
Domestic support obligations  Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relation of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
□ Extensions of credit in an involuntary case  Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of trustee or the order for relief. 11 U.S.C. § 507(a)(3).
Wages, salaries, and commissions  Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sale representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans  Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of busine whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen  Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ <b>Deposits by individuals</b> Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
☐ Taxes and certain other debts owed to governmental units  Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
Commitments to maintain the capital of an insured depository institution  Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federa Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
Claims for death or personal injury while debtor was intoxicated  Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug or

another substance. 11 U.S.C. § 507(a)(10).

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6F (Official Form 6F) (12/07)

In re	Sarah Nerad	Case No.
		Debtor

### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

Check this box is debtor has no electrons nothing unsecure	Ju C	iaiii	is to report on this benedule 1.					
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H W J C	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	N T L N G	コーのコ	PUTE	S P U T	AMOUNT OF CLAIM
Account No. <b>xxxXXXX</b>			Collection agent for Midwest Dental Freeport	T	T E D			
ACS Collections P.O. Box 7739 Rochester, MN 55903-7739		-			<u></u>			122.00
Account No. xxx59XX				П		T	7	
The Affiliated Group 7381 Airport View Dr. SW Rochester, MN 55902			Representing: ACS Collections					Notice Only
Account No.  The Affiliated Group 3055 41st St. NW, Ste. 100 Rochester, MN 55901			Representing: ACS Collections					Notice Only
Account No. xxXXXX  ATG Credit LLC P. O. Box 14895 Chicago, IL 60614-0895		-	Collection agent for Radiology Consultants of Rockford					
						L	$\downarrow$	311.00
_7 continuation sheets attached			S (Total of th	ubte his p			)	433.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Sarah Nerad	Case No
_		Debtor

		_					
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE,	CODEBT	H W	sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	CONTI	UNLIQUIDATED	DISPUTED	
AND ACCOUNT NUMBER (See instructions above.)	T O R	C	IS SUBJECT TO SETOFF, SO STATE.	NTINGENT	U I D A	T E D	AMOUNT OF CLAIM
Account No.				T	E		
ATG Credit 1700 W. Corland St., Ste. 201 Chicago, IL 60622			Representing: ATG Credit LLC				Notice Only
Account No. x2376			Dental expense				
Chad Reedy, D.D.S. 981 W. South St. Freeport, IL 61032-6778		_					
							610.00
Account No. xxxxxx #xxxxxxxx0753			Judgment for contractually liable debt - Northwestern Mutual Life Insurance				
Circuit Clerk of San Diego County 325 S. Melrose, #2A		-					
Vista, CA 92083							
Account No. <b>xxx2389</b> ****			Collection agent for ComEd debt				1,511.00
Account No. XXX2369	l		Collection agent for Collect dept				
Contract Callers Inc. 1058 Claussen Rd., Ste. 110 Augusta, GA 30907-0301		-					
. 3, 2							345.00
Account No. CCI2389****						T	
Contract Callers Inc.			Representing:				
501 Greene St., Ste. 302 Augusta, GA 30901			Contract Callers Inc.				Notice Only
Sheet no. <u>1</u> of <u>7</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of t	Sub his			2,466.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Sarah Nerad	Case No.	_
		Debtor	

CDEDITORIO NA ME	С	Hu	sband, Wife, Joint, or Community	С	U	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C H H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	N	DZLLQULDAFE	ISPUTED	AMOUNT OF CLAIM
Account No. xx5814			Medical expense	Ť	T E		
Crusaders Clinic 1200 W. State St. Rockford, IL 61102-2112		-			D		70.00
Account No.	╁						79.00
Crusader Clinic P.O. Box 71040 Chicago, IL 60694-1040			Representing: Crusaders Clinic				Notice Only
Account No. xxxxxxxxx2596****	╁		Collection agent for Wells Fargo debt				
Enhanced Acquisitions LLC 3840 E. Robinson Rd., Ste. 353 Amherst, NY 14228		-					139.00
Account No. <b>8369</b> ****	╁		Collection agent for Sprint (cable/cellular) debt				100.00
Enhanced Recovery Company P. O. Box 57547 Jacksonville, FL 32241		-					474.00
Account No. <b>x8411</b> **	╁		Collection agent for Kishwaukee Community				171.00
H&R Accounts 7017 John Deere Pkwy. Moline, IL 61265		-	Hospital debt				1,303.00
Sheet no. 2 of 7 sheets attached to Schedule of	<u>-</u>	_	<u> </u>	Subt	ota	1 1	1,692.00

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In re	Sarah Nerad	Case No
_		Debtor

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	CO	U N	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	O D E B T O R	J H H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	NT I NG E N	NL I QU I DAT	S P U T F	AMOUNT OF CLAIM
Account No. xxxxx0139				Т	T E D		
Kishwaukee Community Hospital Payment Processing Center P.O. Box 739 Moline, IL 61266-0739			Representing: H&R Accounts		D		Notice Only
Account No. xx2323			SNAP overpayment				
Illinois Dept. of Human Services Cash Management Unit P.O. Box 19407 Springfield, IL 62794-9407		-					400.00
Account No. xxxx3066	┡					H	100.00
Harvard Collection Services, Inc. 4839 N. Elston Avenue Chicago, IL 60630-2534			Representing: Illinois Dept. of Human Services				Notice Only
Account No. xxxxXXXX			Collection agent for FHN debt				
J.C. Christensen & Associates, Inc. 215 N. Benton Dr. Sauk Rapids, MN 56379-1530		-					635.00
Account No. xxxxXXXX			Collection agent for FHN debt				
J.C. Christensen & Associates, Inc. 215 N. Benton Dr. Sauk Rapids, MN 56379-1530		-					987.00
Sheet no. <b>3</b> of <b>7</b> sheets attached to Schedule of	_	_		Subt	ota	ıl	
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	2,022.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Sarah Nerad	Case No.	_
		Debtor	

	I c	Luc	ahand Wife Isiat as Ossansiste	16			
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UZLLQULDAFE	DISPUTED	AMOUNT OF CLAIM
Account No. RAN0****			Collection agent for Northwestern Mutal Life	]⊤	E		
Kimball Tirey St. John 7676 Hazard Center Dr., Ste. 900 San Diego, CA 92108		-	debt for rental/leasing		D		3,112.00
Account No. RANOXXXX	╁	$\vdash$		+			<u> </u>
Kimball Tirey & St. John 1202 Kettner Blvd. San Diego, CA 92101-3338			Representing: Kimball Tirey St. John				Notice Only
Account No.	t		11/12/2013 Medical expense for son				
KSB Hospital P. O. Box 590 Dixon, IL 61021		-	inicalcular expense for 3011				382.00
Account No.			11/12/2013				002.00
KSB Hospital P. O. Box 590 Dixon, IL 61021		-	Medical Expense for son				262.00
Account No. xx4776	t	$\vdash$	Medical expense				
KSB Hospital & KSB Medical Group P.O. Box 590 Dixon, IL 61021-0590		-					145.00
Sheet no4 of _7 sheets attached to Schedule of	_	<del>'</del>	<u> </u>	Subt	ota	1	0.004.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	e)	3,901.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Sarah Nerad	Case No	_
_		Debtor	

	10	116-	shood Wife laint or Community	C	U	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	NGEN	0Z1_QD_D4FW	l S	AMOUNT OF CLAIM
Account No.			11/19/2013	Т	TE		
KSB Medical Group Inc. P.O. Box 590 Dixon, IL 61021		-	Medical expense for son		D		95.00
Account No. 5862	╅		Collection agent for Mathers Clinic debt				
Lewis James & Associates 1517 N. Wilmot, #221 Tucson, AZ 85712		-					625.00
Account No. xxxxxxxxxxxx1139****	+		Collection agent for Medical-Medical Payment				
Mutual Management SVC 401 E. State St. Rockford, IL 61104-1027		_	Data				1,608.00
Account No. xxx1671	╁		Collection agent for Northern Illinois				
National Credit Management P.O. Box 32900 Saint Louis, MO 63132		-	University debt				4.752.22
Account No.	+	-		$\vdash$			1,753.32
Northern Illinois University Bursar Office 1425 W. Lincoln Highway DeKalb, IL 60115			Representing: National Credit Management				Notice Only
Sheet no. <u>5</u> of <u>7</u> sheets attached to Schedule o Creditors Holding Unsecured Nonpriority Claims	f	<u> </u>	(Total of t	Subt			4,081.32

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B6F (Official Form 6F) (12/07) - Cont.

In re	Sarah Nerad	Case No	_
_	-	Debtor	

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	ΙQ	D I S P U T E D	AMOUNT OF CLAIM
Account No. 01688055  Northern Illinois University Office of the Bursar Swen Parson 235 DeKalb, IL 60115-2828	-		Representing: National Credit Management		E D		Notice Only
Account No.  Rockford Mercantile 2502 S. Alpine Rd. Rockford, IL 61108	_	-	Collection agent for FHN Memorial Hospital debt				676.00
Account No.  Rockford Mercantile 2502 S. Alpine Rd. Rockford, IL 61108	_	-	Collection agent for FHN Memorial Hospital debt				764.00
Account No.  Rockford Mercantile 2502 Alpine Rd. Rockford, IL 61108		-	Collection agency for FHN/Physician debt				381.00
Account No.  RRCA Accounts Management Inc. 201 E. 3rd Street Sterling, IL 61081-3611		-	Collection agent for Now Care L.L.C. and CGH Health Centers Ltd.				157.07
Sheet no. <b>_6</b> of <b>_7</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of t	Subt			1,978.07

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B6F (Official Form 6F) (12/07) - Cont.

In re	Sarah Nerad	Case No.
-		Debtor

CREDITOR'S NAME,	CO	Hu	sband, Wife, Joint, or Community	CO	U	[	Ρĺ	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	OD E B T O R	C 1 M H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	NTINGEN	L QU L C	)   	U T E	AMOUNT OF CLAIM
Account No. xxxxx8133			Outstanding phone bill	Т	A T E			
U.S. Cellular Dept. 0203 Palatine, IL 60055-0203		-			D			99.04
Account No. xxxxxxxx2779****	╁	H	Student loan	+	H	t	+	
U.S. Department of Education 2401 International P.O. Box 7859 Madison, WI 53704		-						
								7,179.00
Account No.  Great Lakes Higher Education P.O. Box 7860 Madison, WI 53707			Representing: U.S. Department of Education					Notice Only
Account No. xxxxxxx1602	t		Medical expense			l	1	
Wellstar Kennestone Hospital P.O. Box 406161 Atlanta, GA 30384-6161		-						276.30
Account No.	╁	$\vdash$		$\perp$	_	t	+	
Wellstar Mail Processing Center P.o. Box 3475 Toledo, OH 43607-0475			Representing: Wellstar Kennestone Hospital					Notice Only
Sheet no7 of _7 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		•	(Total of	Sub			)	7,554.34
2 2			(Total of t		Γota		ı	
			(Report on Summary of So				- 1	24,127.73

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B6G (Official Form 6G) (12/07)

In re	Sarah Nerad	Case No.
		Debtor

### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

Winter & Associates 320 N. Park Blvd. Freeport, IL 61032 One year written lease for debtor's residence.

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B6H (Official Form 6H) (12/07)

In re	Sarah Nerad	Case No.
		Debtor

#### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

Joseph Randolph, Jr.
Unknown - possibly in Mississippi
May be a co-debtor on some debts, possibly
Kimball Tirey & St. John on Northwestern Mutual
Life debt for rental/leasing

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						<u>-</u>				
Fill	in this information to identify	your case:								
Deb	otor 1 Sarah	Nerad			_					
	otor 2 buse, if filing)									
Uni	ted States Bankruptcy Court	for the: NORTHERN DISTRI	ICT OF ILLINOIS							
(If kn	se number		_			☐ An		nt showin	ng post-petition ollowing date:	n chapter
<u>O</u>	fficial Form B 6I					MN	M / DD/ Y	YYY		
S	chedule I: Your	Income								12/1:
atta		nd your spouse is not filing w form. On the top of any addit ment				d case nur	mber (if I	known). A		
		· . i.					Emplo		illig spouse	
	If you have more than one attach a separate page with information about additional	Employment status	<ul><li>■ Employed</li><li>□ Not employed</li></ul>				□ Not er	•		
	employers.	Occupation	Sales							
	Include part-time, seasonal self-employed work.	, or Employer's name	U.S. Cellular							
	Occupation may include stu or homemaker, if it applies.		2705 IL Rt. 26 S Freeport, IL 61							
		How long employed	there? 1 1/2	years			_			
Par	t 2: Give Details Abo	ut Monthly Income								
<b>Esti</b> spou	mate monthly income as of	the date you file this form. If		·	•				•	
HOR	e space, attacii a separate si	leet to this form.				For Debt	tor 1		btor 2 or ing spouse	
2.		s, salary, and commissions (lanthly, calculate what the month		2.	\$	4,0	058.82	\$	N/A	
3.	Estimate and list monthly	overtime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income.	Add line 2 + line 3.		4.	\$	4,05	8.82	\$	N/A	

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Debtor	Sarah Nerad	-	Case r	number (if known)		
			For	Debtor 1		ebtor 2 or ing spouse
С	opy line 4 here	4.	\$	4,058.82	\$	N/A
5. <b>L</b>	ist all payroll deductions:					
5	a. Tax, Medicare, and Social Security deductions	5a.	\$	778.89	\$	N/A
5	o. Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A
5	c. Voluntary contributions for retirement plans	5c.	\$	265.40	\$	N/A
5	d. Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A
5	e. Insurance	5e.	\$	5.86	\$	N/A
51	0	5f.	\$	0.00	\$	N/A
5		5g.	\$	0.00	\$	N/A
5	n. Other deductions. Specify: MetLaw	5h.+	\$ <u></u>	17.54	+ \$	N/A
6. <b>A</b>	dd the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,067.69	\$	N/A
7. <b>C</b>	alculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,991.13	\$	N/A
8. <b>L</b> 8:	ist all other income regularly received:  a. Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	¢	0.00	¢	N/A
8	•	оа. 8b.	\$ <u> </u>	0.00	\$	N/A N/A
8			Ψ	0.00	Ψ	IN/A
	regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A
8		8d.	<u>\$</u> —	0.00	\$ <u> </u>	N/A
8		8e.	\$	0.00	\$	N/A
81	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.	\$	0.00	\$	N/A
8		8g.	\$ <u> </u>	0.00	\$ <u> </u>	N/A
8	n. Other monthly income. Specify:	_ 8h.+	<u>\$</u>	0.00	+ \$	<u>N/A</u>
9. <b>A</b>	dd all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A
10 <b>C</b>	alculate monthly income. Add line 7 + line 9.	10. \$	-	2,991.13 + \$		N/A = \$ 2,991.13
	dd the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. ψ		<u>2,991.13</u> + φ_		N/A -   \$\frac{2,991.13}{2}
11. <b>S</b> In of D	tate all other regular contributions to the expenses that you list in Schedule clude contributions from an unmarried partner, members of your household, your ther friends or relatives.  o not include any amounts already included in lines 2-10 or amounts that are not pecify:	depen	•	•		edule J. 11. +\$ 0.00
V	dd the amount in the last column of line 10 to the amount in line 11. The restrict that amount on the Summary of Schedules and Statistical Summary of Certain oplies					12. \$ <b>2,991.1</b> 3
13. <b>D</b>	o you expect an increase or decrease within the year after you file this form	?				Combined monthly income
	No.					

Official Form B 6I Schedule I: Your Income page 2

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Fill	in this informa	tion to identify yo	ur case:					
Deb	tor 1	Sarah Nerad				Che	eck if this is:	
		Saraii Nerau			_		An amended filing	
Deb	tor 2						•	ving post-petition chapter
(Spo	ouse, if filing)						13 expenses as of	the following date:
Unit	ed States Bankı	ruptcy Court for the:	: NORTH	IERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
Cas	e number					П	A separate filing for	r Debtor 2 because Debtor
(If kı	nown)					_	2 maintains a sepa	
$\cap$	fficial Fo	orm B 6J						
		J: Your I	_ Exner	ises				12/13
				If two married people a	re filing together, bot	h are en	ually responsible fo	
info	ormation. If m	ore space is ne	eded, atta	ch another sheet to this				
nun	nber (if know	n). Answer ever	y questio	n.				
Par	t 1: Descr	ribe Your House	hold					
1.	Is this a joir							
	■ No. Go to	line 2						
		es Debtor 2 live i	in a separ	ate household?				
	_ 100. <b>200</b>		п и сорин					
		-	st file a sep	parate Schedule J.				
2.	Do you have	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents'				Son		1 year	Yes
								□ No
								☐ Yes
								□ No
								Yes
								□ No
2	Da		_					☐ Yes
3.		penses include f people other tl	han	No				
		d your depende		Yes				
D	. O							
		ate Your Ongoi		y Expenses uptcy filing date unless y	ou are using this for	m 26 2 6	unnlement in a Cha	inter 13 case to report
exp	enses as of a plicable date.	a date after the k	pankruptc	y is filed. If this is a supp	plemental <i>Schedule</i> .	, check t	the box at the top o	f the form and fill in the
Incl	luda avnansa	s naid for with r	non-cash	government assistance i	f you know			
				cluded it on Schedule I:				
(Off	ficial Form 6I	.)					Your expe	enses
1	The rental of	or homo owners	hin ovnon	ses for your residence.	noludo firet mortaga			
4.		nd any rent for the			nciude ilist mortgage	4.	\$	550.00
		led in line 4:	· ·					
	4a. Real e	estate taxes				4a.	\$	0.00
		rty, homeowner's	s, or renter	's insurance		4b.	<u> </u>	0.00
	4c. Home	maintenance, re	pair, and u	ıpkeep expenses		4c.	\$	0.00
		owner's associat				4d.	·	0.00
5.	Additional r	mortgage payme	ents for yo	our residence, such as ho	me equity loans	5.	\$	0.00

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6a. Electricity, heat, natural gas       6a. \$       50.00         6b. Water, sewer, garbage collection       6b. \$       30.00         6c. Telephone, cell phone, Internet, satellite, and cable services       6c. \$       235.00         6d. Other. Specify:       6d. \$       0.00         Food and housekeeping supplies       7. \$       650.00         Childcare and children's education costs       8. \$       400.00         Clothing, laundry, and dry cleaning       9. \$       200.00         D. Personal care products and services       10. \$       0.00	Debtor 1 Sarah N	erad	Case num	ber (if known)	
Electricity, heat, natural gas   60.   \$   \$   \$   \$   \$   \$   \$   \$   \$	6. Utilities:				
Bb. Water, sewer, garbage collection   Bc. Telephone, cell phone, Internet, satellite, and cable services   Bc. \$ 235.00		heat, natural das	62	\$	50.00
6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specity: 6d. S	•	· · · · · · · · · · · · · · · · · · ·			
6d. Cither. Specify: Food and housekeeping supplies Citothing, laundry, and dry cleaning Personal care products and services 10. \$ 200.00 Personal care products and services 11. \$ 200.00 Medical and dental expenses 12. \$ 250.00 Insuration, include gas, maintenance, bus or train fare. Do not include car payments, every expense, magazines, and books 13. \$ 250.00 Charitable contributions and religious donations 14. \$ 0.00  15. Life insurance 15. S 0.00 15. Vehicle insurance 15. S 0.00 15. Vehicle insurance 15. S 0.00 15. Cares. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 15. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 15. Car payments for Vehicle 1 17. Car payments for Vehicle 1 17. Car payments for Vehicle 1 17. Car payments for Vehicle 2 17. S 0.00 17. Care payments for Vehicle 1 17. S 0.00 17. Care payments of vehicle 2 17. S 0.00 17. Other. Specify: Student Loan 17. Other. Specify: Student Loan 17. Other payments of vehicle 2 17. S 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0				·	
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Cilothing, laundry, and dry cleaning 9. \$ 200.00 Personal care products and services 10. \$ 0.00 Medical and dental expenses 11. \$ 80.00 Ziransportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 0.00 Charitable contributions and religious donations 14. \$ 0.00 Charitable contributions and religious donations 14. \$ 0.00 Charitable contributions and religious donations 15. Life insurance deducted from your pay or included in lines 4 or 20. 15. Life insurance 15. \$ 0.00 Charitable contributions and religious donations 15. \$ 0.00 Charitable contributions and religious donations 15. \$ 0.00 Charitable insurance 45. \$ 0.00 Charitable contributions and religious donations 15. \$ 0.00 Charitable insurance 45. \$ 0.00 Charitable insurance 55. \$ 0.00 Charitable insurance 55. \$ 0.00 Charitable contributions and religious donations 15. \$ 0.00 Charitable contributions and religious 15. \$ 0.00 Charitable contributions and religious 15. \$ 0.00 Charitable contributions and religious 15.					
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Description of the products and services are reproducted and expenses and the product of the pr				·	
Medical and dental expenses   11. \$   \$0.00	•	· · · · · · · · · · · · · · · · · · ·			
2. Transportation, Include gas, maintenance, bus or train fare.  Do not include car payments.  3. Entertalimment, clubs, recreation, newspapers, magazines, and books  3. Entertalimment, clubs, recreation, newspapers, magazines, and books  3. Charitable contributions and religious donations  10. Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. S	-				
Do not include car payments.  Installment, clubs, recreation, newspapers, magazines, and books  Charitable contributions and religious donations  Charitable contributions and religious donations  Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. Health insurance  15c. Vehicle insurance  15c. Vehicle insurance.  15c. Vehicle insurance.  15d. Other insurance. Specify:  15d. Other insurance. Specify:  15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  16a. \$  0.00  17b. Car payments for Vehicle 1  17c. Car payments for Vehicle 2  17b. \$  0.00  17c. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. Other payments of allimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6).  18 Specify:  19  Other payments on the property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20b. Real estate taxes  20c. \$  0.00  20c. Property, homeowner's, or renter's insurance  20c. \$  0.00  20c. Property, homeowner's association or condominium dues  20c. Specify:  10c. Other: Specify:  10c. Other: Specify:  10c. Other support of the payments of this form or on Schedule I: Your Income.  21c. Property, homeowner's association or condominium dues  22c. Specify:  23c. Capy line 12 (your combined monthly income) from Schedule I.  23c. Capy line 12 (your combined monthly income) from Schedule I.  23c. Capy line 12 (your combined monthly income) from Schedule I.  23c. Subtract your monthly expenses from your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease bec		•	11.	\$	80.00
Secretary and the secretary an			10	¢	250.00
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17d. Other. Specify:  18			17b.	\$	0.00
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■ NO.	For example, do you modification to the	ou expect to finish paying for your car loan within the year or do you expect yo			se or decrease because of a
☐ Yes. Explain:					

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B6 Declaration (Official Form 6 - Declaration). (12/07)

# **United States Bankruptcy Court Northern District of Illinois**

In re	Sarah Nerad			Case No.	
			Debtor(s)	Chapter	7
	<b>DECLARATION C</b> DECLARATION UNDER H		<b>NING DEBTOR'S SO</b> DF PERJURY BY INDIVI		
	I declare under penalty of perjury the sheets, and that they are true and correct to the		<i>z z</i> .		es, consisting of23
Date	November 25, 2014	Signature	/s/ Sarah Nerad Sarah Nerad Debtor		

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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B7 (Official Form 7) (04/13)

## **United States Bankruptcy Court Northern District of Illinois**

In re	Sarah Nerad		Case No.	Case No.	
		Debtor(s)	Chapter	7	

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

#### 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT <b>\$278.82</b>	SOURCE 2012 - IPacesetters LLC
\$6,601.00	2012 - Generation Wireless
\$498.00	2012 - Unemployment
\$13,301.59	2013 - USCC Services LLC
\$41,009.50	2014 - USCOC of Cen IL

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B7 (Official Form 7) (04/13)

#### 2. Income other than from employment or operation of business

None 

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**AMOUNT SOURCE** 

\$1,176.00 2013 - Scholarship income

#### 3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF **PAYMENTS** 

AMOUNT PAID

AMOUNT STILL **OWING** 

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

> DATES OF PAYMENTS/ TRANSFERS

**AMOUNT** PAID OR VALUE OF **TRANSFERS** 

AMOUNT STILL **OWING** 

NAME AND ADDRESS OF CREDITOR

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

### 4. Suits and administrative proceedings, executions, garnishments and attachments

None 

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT COURT OR AGENCY NATURE OF AND CASE NUMBER **PROCEEDING** AND LOCATION Northwestern Mutual Life Insurance vs Sarah Civil Randolph

San Diego County - Vista, CA

STATUS OR DISPOSITION **Judgment** 

Docket #: 200800040753

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

 $<sup>^</sup>st$  Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B7 (Official Form 7) (04/13)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

#### 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

#### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

PROPERTY

#### 7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

#### 8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

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#### 9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

Edward J. Mitchell, Attorney at Law 110 N. Broad St. Lanark, IL 61046 DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR

Payment will be made by Hyatt Legal Plans - TDS Corporation

AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY

\$900.00

#### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

RANSFER(S) IN PROPERTY

#### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

#### 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

### 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

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#### 14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

#### 15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY
218 W. Homer Sarah Nerad 2011 to August, 2012/

Freeport, IL 61032 December, 2012 to February, 2014 to April

2013/ February, 2014 to April,

2014

507 W. 7th Street Sarah Randolph February, 2013 to January,

Dixon, IL 61021 201

Sarah Nerad August, 2012 to November,

2012

397A Eddie Dr. Sarah Nerad August, 2012

Vista, CA 92083-5803

Dorm at NIU in DeKalb, IL

122 E. Fellows St., Apt. 8B Sarah Nerad March, 2014 - April, 2014

Dixon, IL 61021-2182

#### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF

**ENVIRONMENTAL** 

GOVERNMENTAL UNIT NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

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NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which

the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER STATUS OR DISPOSITION

#### 18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

NATURE OF BUSINESS BEGINNING AND ENDING DATES

NAME

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

#### 19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

#### NAME AND ADDRESS

#### DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME ADDRESS

### DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

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**ADDRESS** NAME

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was

issued by the debtor within two years immediately preceding the commencement of this case.

20. Inventories

DATE ISSUED

None a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

NAME AND ADDRESS

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY DATE OF INVENTORY RECORDS

21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS NATURE OF INTEREST PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NATURE AND PERCENTAGE NAME AND ADDRESS TITLE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

**NAME ADDRESS** DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within one year immediately preceding the commencement of this case.

NAME AND ADDRESS TITLE DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation

in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the commencement of this case.

NAME & ADDRESS

DATE AND PURPOSE OF RECIPIENT, OF WITHDRAWAL RELATIONSHIP TO DEBTOR

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

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#### 24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

#### 25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

\* \* \* \* \* \*

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date November 25, 2014

Signature /s/ Sarah Nerad

Sarah Nerad

Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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B8 (Form 8) (12/08)

## United States Bankruptcy Court Northern District of Illinois

Northern Dis	trict of Illinois		
		Case No.	_
L	Debtor(s)	Cnapter	7
NDIVIDUAL DERTO	R'S STATEMEN	NT OF INTENT	ΓΙΟΝ
(DIVID CHE DEDIC	I S S I I I I I I I I I I I I I I I I I	VI OI IIVIZIVI	
· · · · · · · · · · · · · · · · · · ·	• •	leted for <b>EACH</b>	debt which is secured by
1 0			
	Describe Property	y Securing Debt:	
☐ Retained			
k at least one):			
,			
/C 1		G 8 500(0)	
(for example, avo	id lien using 11 U.S	s.C. § 522(t)).	
	☐ Not claimed as a	exempt	
expired leases. (All three	columns of Part B	must be completed	d for each unexpired lease.
Describe Leased Dre	mantre	Lagge will be	A coursed sussessent to 11
Describe Leased Pro	perty:		
		☐ YES	□ NO
the above indicates my i	ntention as to any	property of my	octata cacurina a daht and/o
ed lease.	ntention as to any	property of my	state securing a debt and/or
Signature /	s/ Sarah Nerad		
1	Describe Leased Pro	Describe Property  Describe Property  Retained  k at least one):  One of the estate. (Part A must be fully completed additional pages if necessary.)  Describe Property  Not claimed as one expired leases. (All three columns of Part B in the above indicates my intention as to any	Debtor(s)  Case No. Chapter  NDIVIDUAL DEBTOR'S STATEMENT OF INTENT of the estate. (Part A must be fully completed for EACH additional pages if necessary.)  Describe Property Securing Debt:  Retained  k at least one):  (for example, avoid lien using 11 U.S.C. § 522(f)).  Not claimed as exempt  expired leases. (All three columns of Part B must be completed U.S.C. § 365(  YES

Sarah Nerad Debtor Case 14-83546 Doc 1 Filed 11/25/14 Entered 11/25/14 14:57:29 Desc Main Document Page 39 of 47

## **United States Bankruptcy Court** Northern District of Illinois

In r	e Sarah Nerad		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPENS	SATION OF ATTO	RNEY FOR DI	EBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b) paid to me within one year before the filing of the petition in behalf of the debtor(s) in contemplation of or in connection	n bankruptcy, or agreed to	be paid to me, for ser		
	For legal services, I have agreed to accept		\$	900.00	
	Prior to the filing of this statement I have received			0.00	
	Balance Due		\$	900.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	☐ Debtor ■ Other (specify): <b>TDS Corp</b>	poration through Hyat	t Legal Plans		
4.	■ I have not agreed to share the above-disclosed compens	sation with any other perso	on unless they are mem	bers and associat	es of my law firm.
	☐ I have agreed to share the above-disclosed compensatio copy of the agreement, together with a list of the names				my law firm. A
5.	In return for the above-disclosed fee, I have agreed to rende	er legal service for all aspe	ects of the bankruptcy	case, including:	
	<ul><li>a. Analysis of the debtor's financial situation, and rendering</li><li>b. Preparation and filing of any petition, schedules, statemed</li><li>c. Representation of the debtor at the meeting of creditors and</li><li>d. [Other provisions as needed]</li></ul>	ent of affairs and plan whi	ch may be required;	-	bankruptcy;
6.	By agreement with the debtor(s), the above-disclosed fee do Representation of the debtors in any disch any other adversary proceeding.			es, relief from	stay actions or
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of any agbankruptcy proceeding.	greement or arrangement f	or payment to me for i	representation of	the debtor(s) in
Date	ed: November 25, 2014	/s/ Edward J. M			
		Edward J. Mitcl Edward J. Mitcl 110 N. Broad St Lanark, IL 6104 815-493-6339	nell, Attorney at Lav i.	N	

## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

## NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

## 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

## Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

## <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the

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Form B 201A, Notice to Consumer Debtor(s)

Page 2

Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1,167 filling fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

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B 201B (Form 201B) (12/09)

## United States Rankruntcy Court

	Om	Northern District of Illinois	urt		
In re	Sarah Nerad		Case No.		
		Debtor(s)	Chapter	7	
Code.		OF NOTICE TO CONSUM 42(b) OF THE BANKRUPT  Certification of Debtor  ave received and read the attached no	CY CODE		uptcy
	Nerad	X /s/ Sarah Nera	d	November 25, 2	2014
Printed	d Name(s) of Debtor(s)	Signature of D	ebtor	Date	
Case N	No. (if known)	X			
		Signature of Jo	int Debtor (if any)	Date	

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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## United States Bankruptcy Court Northern District of Illinois

		- 10- 1		
In re	Sarah Nerad		Case No.	
		Debtor(s)	Chapter <b>7</b>	
	VE	CRIFICATION OF CREDITOR	MATRIX	
		Number o	of Creditors:	41
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of cred	ditors is true and correct to	the best of my
Date:	November 25, 2014	/s/ Sarah Nerad		

ACS Collections P.O. Box 7739 Rochester, MN 55903-7739

ATG Credit 1700 W. Corland St., Ste. 201 Chicago, IL 60622

ATG Credit LLC P. O. Box 14895 Chicago, IL 60614-0895

Chad Reedy, D.D.S. 981 W. South St. Freeport, IL 61032-6778

Circuit Clerk of San Diego County 325 S. Melrose, #2A Vista, CA 92083

Contract Callers Inc. 1058 Claussen Rd., Ste. 110 Augusta, GA 30907-0301

Contract Callers Inc. 501 Greene St., Ste. 302 Augusta, GA 30901

Crusader Clinic P.O. Box 71040 Chicago, IL 60694-1040

Crusaders Clinic 1200 W. State St. Rockford, IL 61102-2112

Enhanced Acquisitions LLC 3840 E. Robinson Rd., Ste. 353 Amherst, NY 14228

Enhanced Recovery Company P. O. Box 57547 Jacksonville, FL 32241

Great Lakes Higher Education P.O. Box 7860 Madison, WI 53707

H&R Accounts 7017 John Deere Pkwy. Moline, IL 61265

Harvard Collection Services, Inc. 4839 N. Elston Avenue Chicago, IL 60630-2534

Illinois Dept. of Human Services Cash Management Unit P.O. Box 19407 Springfield, IL 62794-9407

J.C. Christensen & Associates, Inc. 215 N. Benton Dr. Sauk Rapids, MN 56379-1530

J.C. Christensen & Associates, Inc. 215 N. Benton Dr. Sauk Rapids, MN 56379-1530

Joseph Randolph, Jr. Unknown - possibly in Mississippi

Kimball Tirey & St. John 1202 Kettner Blvd. San Diego, CA 92101-3338

Kimball Tirey St. John 7676 Hazard Center Dr., Ste. 900 San Diego, CA 92108

Kishwaukee Community Hospital Payment Processing Center P.O. Box 739 Moline, IL 61266-0739

KSB Hospital P. O. Box 590 Dixon, IL 61021 KSB Hospital P. O. Box 590 Dixon, IL 61021

KSB Hospital & KSB Medical Group P.O. Box 590 Dixon, IL 61021-0590

KSB Medical Group Inc. P.O. Box 590 Dixon, IL 61021

Lewis James & Associates 1517 N. Wilmot, #221 Tucson, AZ 85712

Mutual Management SVC 401 E. State St. Rockford, IL 61104-1027

National Credit Management P.O. Box 32900 Saint Louis, MO 63132

Northern Illinois University Bursar Office 1425 W. Lincoln Highway DeKalb, IL 60115

Northern Illinois University Office of the Bursar Swen Parson 235 DeKalb, IL 60115-2828

Rockford Mercantile 2502 S. Alpine Rd. Rockford, IL 61108

Rockford Mercantile 2502 S. Alpine Rd. Rockford, IL 61108

Rockford Mercantile 2502 Alpine Rd. Rockford, IL 61108

RRCA Accounts Management Inc. 201 E. 3rd Street Sterling, IL 61081-3611

The Affiliated Group 7381 Airport View Dr. SW Rochester, MN 55902

The Affiliated Group 3055 41st St. NW, Ste. 100 Rochester, MN 55901

U.S. Cellular Dept. 0203 Palatine, IL 60055-0203

U.S. Department of Education 2401 International P.O. Box 7859 Madison, WI 53704

Wellstar Mail Processing Center P.o. Box 3475 Toledo, OH 43607-0475

Wellstar Kennestone Hospital P.O. Box 406161 Atlanta, GA 30384-6161

Winter & Associates 320 N. Park Blvd. Freeport, IL 61032